

Appl. No. 09/779,093
Amdt. dated October 2, 2003
Reply to Office Action of July 28, 2003

M. Lewis
10-14-03
10/1C

PATENT
Autoliv Docket No. 14094

Fee OK



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants: Davin G. Saderholm et al.)
Serial No.: 09/779,093)
Filed: February 8, 2001) Group Art
For: INFLATABLE CURTAIN CUSHION) Unit: 3616
Examiner: Ilan, Ruth)
)

AMENDMENT AND RESPONSE TO OFFICE ACTION

Commissioner for Patents
PO Box 1450
Alexandria, VA 22313-1450

Dear Sir:

In response to the Office Action mailed by the Examiner on July 28, 2003, please amend the above-referenced application as follows:

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GROUP 3600

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3636



PTO/SB/21 (08-00)
 Approved for use through 10/31/2002. OMB 0651-0031
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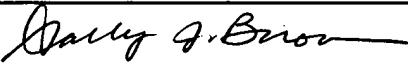
		Application Number	09/779,093
		Filing Date	02/08/2001
		First Named Inventor	Davin G. Saderholm et al.
		Group Art Unit	3616
		Examiner Name	Ilan, Ruth
Total Number of Pages in This Submission			14094

ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment / Reply	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Response to Missing Parts/Incomplete Application		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		
Remarks		

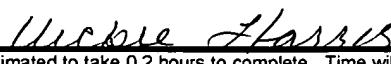
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Autoliv ASP, Inc.
Signature	
Date	10/2/03

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on this date: 10-2-03

Typed or printed name	Vickie Harris		
Signature		Date	10-02-03

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